

SERIAL NUMBER <div style="text-align: center;">09/431,449</div>	FILING DATE <div style="text-align: center;">11/01/99</div>	CLASS <div style="text-align: center;">711</div>	GROUP ART UNIT <div style="text-align: center;">2759</div>	ATTORNEY DOCKET NO. <div style="text-align: center;">6572-14</div>
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APPLICANT

ANTHONY P. GALLUSCIO, INDIALANTIC, FL; WILLIAM L. HOLT, COCO BEACH, FL;
DOUGLAS M. DYER, INDIALANTIC, FL; ALBERT T. MONTROY, MELBOURNE, FL.

****CONTINUING DOMESTIC DATA*******
 VERIFIED
NO P.H.

****371 (NAT'L STAGE) DATA*******
 VERIFIED
NO P.H.

****FOREIGN APPLICATIONS*******
 VERIFIED
NO P.H.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/01/99 ** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY <div style="text-align: center;">FL</div>	SHEETS DRAWING <div style="text-align: center;">5</div>	TOTAL CLAIMS <div style="text-align: center;">18</div>	INDEPENDENT CLAIMS <div style="text-align: center;">3</div>
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ADDRESS

ROBERT J SACCO
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 P O BOX 3188
 WEST PALM BEACH FL 33402-3188

TITLE

HIGH SPEED INTERPROCESS COMMUNICATION

FILING FEE RECEIVED <div style="text-align: center;">\$445</div>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit </div>
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